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PTO/SB/01 (12-97)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number JAB 1426-PCT-USA

First Named Inventor De Corte, Bart

COMPLETE IF KNOWN

Application Number /

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

2,4-DISUBSTITUTED TRIAZINE DERIVATIVES

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) **11/04/1999** as United States Application Number or PCT International

Application Number **PCT/EP99/08688** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
99.203.128.6	EP	09/24/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/107799	11/10/1998	

[Page 1 of 5]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

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Name	Registration Number	Name	Registration Number
Steven P. Berman	24,772	Michael Stark	32,495
Andrea L. Colby	30,194	Ellen C. Coletti	34,140
		Mary A. Appollina	34,087

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	Philip S. Johnson				
Address	Johnson & Johnson				
Address	One Johnson & Johnson Plaza				
City	New Brunswick	State	NJ	ZIP	08933-7003
Country	USA	Telephone	(732) 524-2359	Fax	(732) 524-2808

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Bart		De Corte			
Inventor's Signature				Date	
Residence: City	Southampton	State	PA	Country	USA
Post Office Address	1590 Winding Road				
Post Office Address					
City	Southampton	State	PA	ZIP	18966
		Country	USA		

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

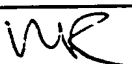

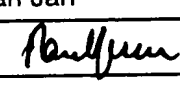
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 5

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Marc René				de Jonge			
Inventor's Signature				Date	March 2, 2001		
Residence: City	CA Tilburg	State		Country	Netherlands	Citizenship	Netherlands
Post Office Address	Hontenissestraat 3						
Post Office Address							
City	CA Tilburg	State		ZIP	5045	Country	Netherlands
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Jan				Heeres			
Inventor's Signature				Date	March 2, 2001		
Residence: City	Vosselaar	State		Country	Belgium	Citizenship	Netherlands
Post Office Address	Leemskuilen 18						
Post Office Address							
City	Vosselaar	State		ZIP	2350	Country	Belgium
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Paul Adriaan Jan				Janssen			
Inventor's Signature				Date	March 2, 2001		
Residence: City	Vosselaar	State		Country	Belgium	Citizenship	Belgium
Post Office Address	Antwerpsesteenweg 20						
Post Office Address							
City	Vosselaar	State		ZIP	2350	Country	Belgium

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>4</u> of <u>5</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Robert W.				Kavash			
Inventor's Signature						Date	
Residence: City	Glenside	State	PA	Country	USA	Citizenship	USA
Post Office Address	148 N. Keswick Avenue						
Post Office Address							
City	Glenside	State	PA	ZIP	19038	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Lucien Maria Henricus				Koymans			
Inventor's Signature						Date	March 2, 2001
Residence: City	Retie	State		Country	Belgium	Citizenship	Netherlands
Post Office Address	Pastorijstraat 11						
Post Office Address							
City	Retie	State		ZIP	2470	Country	Belgium
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Michael Joseph				Kukla			
Inventor's Signature						Date	
Residence: City	Maple Glen	State	PA	Country	USA	Citizenship	USA
Post Office Address	1551 Oak Hollow Drive						
Post Office Address							
City	Maple Glen	State	PA	ZIP	19002	Country	USA

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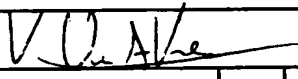
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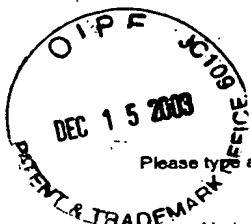
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Donald William				Ludovici			
Inventor's Signature						Date	
Residence: City	Quakertown	State	PA	Country	USA	Citizenship	USA
Post Office Address	1390 Masi Road						
Post Office Address							
City	Quakertown	State	PA	ZIP	18951	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Koen Jeanne Alfons				Van Aken			
Inventor's Signature						Date	March 2, 2001
Residence: City	Turnhout	State		Country	Belgium	Citizenship	Belgium
Post Office Address	Tuinbouwstraat 22, bus 2						
Post Office Address							
City	Turnhout	State		ZIP	2300	Country	Belgium
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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First Named Inventor De Corte, Bart

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
99.203.128.6	EP	09/24/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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[Page 1 of 5]

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

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☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

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Number Bar Code
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Name	Registration Number	Name	Registration Number
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Andrea L. Colby	30,194	Ellen C. Coletti	34,140
		Mary A. Appollina	34,087

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Direct all correspondence to: ☐ Customer Number OR ☒ Correspondence address below

Name	Philip S. Johnson				
Address	Johnson & Johnson				
Address	One Johnson & Johnson Plaza				
City	New Brunswick	State	NJ	ZIP	08933-7003
Country	USA	Telephone	(732) 524-2359	Fax	(732) 524-2808

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Bart	De Corte

Inventor's Signature				Date	Feb 21, 2001
Residence: City	Southampton	State	PA	Country	USA
Post Office Address	1590 Winding Road				
Post Office Address					
City	Southampton	State	PA	ZIP	18966
		Country	USA		

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (3-97)
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 5

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Marc René				de Jonge			
Inventor's Signature				Date			
Residence: City	CA Tilburg	State		Country	Netherlands	Citizenship	Netherlands
Post Office Address		Hontenissestraat 3					
Post Office Address							
City	CA Tilburg	State		ZIP	5045	Country	Netherlands
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Jan				Heeres			
Inventor's Signature				Date			
Residence: City	Vosselaar	State		Country	Belgium	Citizenship	Netherlands
Post Office Address		Leemskuilen 18					
Post Office Address							
City	Vosselaar	State		ZIP	2350	Country	Belgium
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Paul Adriaan Jan				Janssen			
Inventor's Signature				Date			
Residence: City	Vosselaar	State		Country	Belgium	Citizenship	Belgium
Post Office Address		Antwerpsesteenweg 20					
Post Office Address							
City	Vosselaar	State		ZIP	2350	Country	Belgium

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>4</u> of <u>5</u>
--------------------	---

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Robert W.				Kavash			
Inventor's Signature	<i>Robert W. Kavash</i>					Date	21-2-01
Residence: City	Glenside	State	PA	Country	USA	Citizenship	USA
Post Office Address 148 N. Keswick Avenue							
Post Office Address							
City	Glenside	State	PA	ZIP	19038	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Lucien Maria Henricus				Koymans			
Inventor's Signature						Date	
Residence: City	Retie	State		Country	Belgium	Citizenship	Netherlands
Post Office Address Pastorijstraat 11							
Post Office Address							
City	Retie	State		ZIP	2470	Country	Belgium
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Michael Joseph				Kukla			
Inventor's Signature	<i>Michael J. Kukla</i>					Date	21-2-01
Residence: City	Maple Glen	State	PA	Country	USA	Citizenship	USA
Post Office Address 1551 Oak Hollow Drive							
Post Office Address							
City	Maple Glen	State	PA	ZIP	19002	Country	USA

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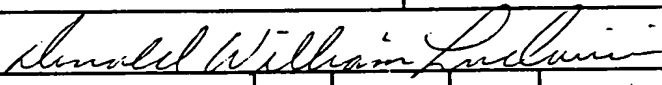
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 5 of 5

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Donald William				Ludovici			
Inventor's Signature				Date	21-02-01		
Residence: City	Quakertown	State	PA	Country	USA	Citizenship	USA
Post Office Address	1390 Masi Road						
Post Office Address							
City	Quakertown	State	PA	ZIP	18951	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Koen Jeanne Alfons				Van Aken			
Inventor's Signature				Date			
Residence: City	Turnhout	State		Country	Belgium	Citizenship	Belgium
Post Office Address	Tuinbouwstraat 22, bus 2						
Post Office Address							
City	Turnhout	State		ZIP	2300	Country	Belgium
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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